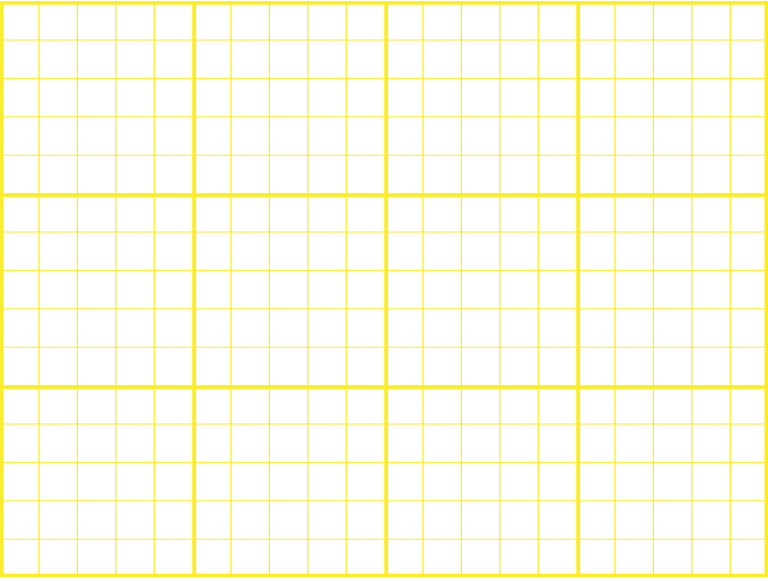


MOBILE HOME VALUATION WORKSHEET

NAME OF MOBILE HOME OWNER				DATE VIEWED		ASSMT. YEAR		
OWNER'S PERMANENT ADDRESS				MUNICIPALITY		COUNTY		
NAME OF PARK				ADDRESS OF MOBILE HOME				
<input type="checkbox"/> MOBILE HOME ASSESSED AS PERSONAL PROPERTY <input type="checkbox"/> MONTHLY PARKING PERMIT FEE (USE WITH FORM PA-118)				<input type="checkbox"/> MOBILE HOME ASSESSED AS REAL PROPERTY <input type="checkbox"/> EXEMPT				
MOBILE HOME DESCRIPTION								
MANUFACTURER'S NAME				MODEL OR POPULAR NAME				
SERIAL NUMBER		YR. OF MANUFACTURE	YR. OF PURCHASE	PURCHASE PRICE	PURCHASED AS: <input type="checkbox"/> NEW <input type="checkbox"/> USED			
WHERE PURCHASED			WEIGHT LBS.	WIDTH FT.	LENGTH FT.	AREA SQ. FT.	COLOR	
GRADE OF CONSTRUCTION <input type="checkbox"/> FAIR <input type="checkbox"/> AVERAGE <input type="checkbox"/> GOOD		CONDITION <input type="checkbox"/> FAIR <input type="checkbox"/> AVERAGE <input type="checkbox"/> GOOD <input type="checkbox"/> VERY GOOD			NO. OF ROOMS BDRMS _____ BATHS _____ TOTAL ROOMS _____			
LOT SIZE	LOT IMPROVEMENTS <input type="checkbox"/> CURB & GUTTER <input type="checkbox"/> SIDEWALKS <input type="checkbox"/> STREETS <input type="checkbox"/> PARKING <input type="checkbox"/> _____ <input type="checkbox"/> _____							
UTILITIES <input type="checkbox"/> WATER <input type="checkbox"/> SEWER <input type="checkbox"/> WELL <input type="checkbox"/> SEPTIC <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> SOLAR/WIND <input type="checkbox"/> OTHER _____							LOT RENTAL	
GROUND FLOOR AREA SKETCH: 				ATTACHMENTS				
				ATTACHMENTS	RCN	% RESID.	RCNLD	
				Foundation	\$		\$	
				Room Addition				
				Porch				
				Patio				
				Skirting				
				Carport				
				Fireplace				
TOTAL				\$				
VALUATION SUMMARY								
Indicated Value By The Cost Approach (From Side B)				\$ _____				
Indicated Value By The Market Approach (From Side B)				\$ _____				
FINAL CONCLUSION OF VALUE						\$ _____		
NOTE: For assessment purposes final value estimate should be calculated at the local level of assessment.								
REMARKS:								
APPRAISER				APPRAISAL DATE				

VALUATION					
COST APPROACH					
1. Replacement Cost of New Mobile Home		\$ _____	(RCN)		
2. X % Residual (Depreciation) _____ %	=	\$ _____	(RCNLD)		
3. + Set up Charge, Transportation, Etc.		\$ _____			
4. + RCNLD of Attachments (from "Attachments," Side A)		\$ _____			
5. INDICATED VALUE BY COST APPROACH (LINES 2+3+4)		\$ _____			
MARKET APPROACH					
MOBILE HOME MARKET DATA ANALYSIS					
Subject	Comp No. 1	Comp No. 2	Comp No. 3		
Park Name	Park Name	Park Name	Park Name		
Address	Address	Address	Address		
Size	Size	Size	Size		
Rooms	Rooms	Rooms	Rooms		
Age	Age	Age	Age		
Condition	Condition	Condition	Condition		
Quality	Quality	Quality	Quality		
Lot Size	Lot Size	Lot Size	Lot Size		
Sale Date	Sale Date	Sale Date	Sale Date		
Terms	Terms	Terms	Terms		
Sale Price	Sale Price	Sale Price	Sale Price		
Included Extras	Included Extras	Included Extras	Included Extras		
Per S.F. Value	Per S.F. Value	Per S.F. Value	Per S.F. Value		
Comments					
MARKET ADJUSTMENTS					
COMP NO. 1		COMP NO. 2		COMP NO. 3	
(+)	(-)	(+)	(-)	(+)	(-)
Location	_____	Location	_____	Location	_____
Size	_____	Size	_____	Size	_____
Age	_____	Age	_____	Age	_____
Condition	_____	Condition	_____	Condition	_____
Quality	_____	Quality	_____	Quality	_____
Time	_____	Time	_____	Time	_____
Terms	_____	Terms	_____	Terms	_____
Extras	_____	Extras	_____	Extras	_____
Misc.	_____	Misc.	_____	Misc.	_____
Totals	_____	Totals	_____	Totals	_____
Net Adjust.	_____	Net Adjust.	_____	Net Adjust.	_____
Indict. Value	_____	Indict. Value	_____	Indict. Value	_____
INDICATED VALUE BY THE MARKET APPROACH \$ _____					